FOR INSTRUCTIONS, SEE BACK OF FORM DISCLOSURE SUMMARY PAGE Reset Form	FORM
COMMITTEE NAME (Must be same as on Statement of Organization)	DR-2 (Rev. 07/2003) DISCLOSURE REPORT
IMPORTANT: Indicate type of committee you are reporting for:	For Office Use Only 17702 Comm. # 17702 Ingged in
(8) Support State of Conditates	Scanned
CANDIDATE COMMITTEES ONLY:	Computer AM
Office Sought District (If Senate or House)	Audited
County Supervisor	
SIGNATURE OF TREASURER (or person filing this report) TELEPHONE	On I made
SIGNATURE OF TREASURER (or person filing this report) TELEPHONE	DATE SIGNED
Late filed reports are subject to possible civil and criminal p	1000Minus
SEE INSTRUCTIONS ON BACK AND COMPLETE THE EQUI OMPLE SENTENCE	
I AM FILING A COUNTY COCAL CANDIDATE DEPORT FOR ANY MASTER FOR	Walking at the second
CRIGINAL = JAN 2008 REPORT	(2)NON-ELECTION YEAR,
Indicate one	
MEHECK IE AMENDMENT TO REPORT DATED JUNE 12007 LOCAL CON	remittees, enter Date of Election . 4 2008
Chart if this is final flowing.	Local Committees enter County in
Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (You must continue to file reports until a Notice of Dissolution is filed.)	ction is held Colen te
	To see the second secon
OTATEMENT OF CLOSE OF COLUMN	
STATEMENT OF CASH ON HAND	
CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.)	144. 19
ADD TOTAL MONEY TAKEN IN THIS PERIOD	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	100, 00
Schedule F: Loans Received total (Attach Schedule F)	
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	
(Schedule H applies to Candidates' Committees Only)	
SUB-TOTAL\$	244,19
CODINGO TOTAL MONET OPENT THIS PERSOD	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	
Schedule F: Loan Repayments total (Attach Schedule F)	
CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)\$	
**UNPAID BILLS (From Schedule D - Attach Schedule D)	
** Tarbo Cont Ribo Lone (From Schedule E - Attach Schedule E)	
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)\$	
CANDIDATE COMMITTEES ONLY:	
CONSULTANT BREAKDOWN (Schedule G Attached?)	
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	INO INO

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)						
KRUSE	For	District	I	Supervisor		

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FO FUND RAISEI
1/12/07	_{СК#} /339	Jean M. Kruse 1243 170 th Ave Donnellson, 1A 52625	wife	\$ 100.00	INCOM
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		TOTAL (if last page	SUB-TOTAL	100,00	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page __/__ of __/___ (for Schedule A)